

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 95 APR 24 AM 11:53 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # P93000081784 (9)					
1. Corporation Name 1231 CORP					
Principal Place of Business 1231 NE 8TH AVE FT LAUDERDALE FL 33304		Mailing Address 1231 NE 8TH AVE FT LAUDERDALE FL 33304		DO NOT WRITE IN THIS SPACE.	
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/30/1983	
21		2a		3a. Date of Last Report 05/01/1994	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 65-0451922	
22		27		Applied For Not Applicable	
City & State		City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Zip		Zip		7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	
24		29		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
FISHMAN J.R. 1231 NE 8TH AVE FT. LAUDERDALE FL 33304				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 Zip Code FL	
11. Pursuant to the provisions of 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, which change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and agree to, the provisions of 607.0505, Florida Statutes.					
SIGNATURE _____ DATE _____ (NOTE: Registered Agent signature required when registering)					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE		11 TITLE		Change ☒ Addition ☐	
NAME		12 NAME		NO LONGER DT	
STREET ADDRESS		13 STREET ADDRESS			
CITY - ST - ZIP		14 CITY - ST - ZIP			
TITLE		21 TITLE		Change ☐ Addition ☐	
NAME		22 NAME			
STREET ADDRESS		23 STREET ADDRESS			
CITY - ST - ZIP		24 CITY - ST - ZIP			
TITLE		31 TITLE		Change ☐ Addition ☐	
NAME		32 NAME			
STREET ADDRESS		33 STREET ADDRESS			
CITY - ST - ZIP		34 CITY - ST - ZIP			
TITLE		41 TITLE		Change ☐ Addition ☐	
NAME		42 NAME			
STREET ADDRESS		43 STREET ADDRESS			
CITY - ST - ZIP		44 CITY - ST - ZIP			
TITLE		51 TITLE		Change ☐ Addition ☐	
NAME		52 NAME			
STREET ADDRESS		53 STREET ADDRESS			
CITY - ST - ZIP		54 CITY - ST - ZIP			
TITLE		61 TITLE		Change ☐ Addition ☐	
NAME		62 NAME			
STREET ADDRESS		63 STREET ADDRESS			
CITY - ST - ZIP		64 CITY - ST - ZIP			
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information included in this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or in an attachment with an address.					
SIGNATURE: <i>[Signature]</i>		4-18-95		305 527 0907	
(PRINT NAME AND TITLE OF SIGNING OFFICER OR DIRECTOR)		(Date)		(Print Name & Phone #)	